

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) MICHAEL FERBER

Name

(2) 422 NE 2 AVENUE

Address (number and street)

FT. LAUD. FL 33301

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate (office sought):

CITY COMMISSION DISTRICT 2

☐ Political Committee

☐ CHECK IF PC HAS DISBANDED

☐ Committee of Continuous Existence

☐ CHECK IF CCE HAS DISBANDED

☐ Party Executive Committee

☐ Electioneering Communication

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 11 / 22 / 11 To 12 / 23 / 11 Report Type _____

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____

Loans \$ 500

Total Monetary \$ _____

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 400

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 500

(10) TOTAL Monetary Expenditures To Date

\$ 400

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) MICHAEL FERBER

☐ Individual (only for electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) MICHAEL FERBER

☐ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name MICHAEL FERBER

(2) I.D. Number _____

(3) Cover Period 11 / 22 / 11 through 12 / 23 / 11

(4) Page _____ of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11 / 22 / 11	CITY OF FT. LAUDERDALE 100 N. ANDREWS AVE. FT. LAUD., FL 33301	QUALIFYING FEE	MON		\$ 100
# 1					
11 / 22 / 11	CITY OF FT. LAUDERDALE 100 N. ANDREWS AVE. FT. LAUD., FL 33301	1% ELECTION ASSESSMENT FEE	MON		\$ 300
# 2					
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name MICHAEL FERBER

(2) I.D. Number _____

(3) Cover Period 11 / 22 / 11 through 12 / 23 / 11

(4) Page _____ of _____

[illegible]